L22000025757

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
TALLAHASSEE, FL

2022 HAR 31 PH 6: 52

O SIMMONS APR 1 4 2022

COVER LETTER

	gistration Sec ision of Corp			
		EIMPROVEMENT LLC		
SUBJECT:	-	Name of Limi	ted Liability Company	
The enclosed	d Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ndence concerning this matter	to the following:	
		RODRICUS TERRY		_
			Name of Person	
			Firm/Company	·
		3019 LAGNEY DRIVE		
			Address	
		JACKSONVILLE		
			City/State and Zip Code	
		TERRY@TTFHOMEIMPE	ROVEMENTLLC.COM to be used for future annual report not	Thurston V
For further i	information c	e-mail address: (aic 3000)
RODRICU	S TERRY		904 9948583 at ()	
	Name o	t Person	Area Code Daytii	ne Telephone Number
Enclosed is	a check for th	he following amount:		
■ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	ailing Addres		Street Address:	- vien
	egistration !		Registration Section of Co	
	ivision of C O. Box 632	Corporations 27	The Centre of	
	ollahassee.			oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED

2022 MAR 31 PM 6: 52 **OF**

TTF HOME IMPROVEMENT LLC

SECRETARY OF STATE

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability C	ompany were filed o	on	and assigned	
Florida document number 1.22000025757	<u></u> .			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ited liability compa	ny here:		
The new name must be distinguishable and contain the words "Lim	ited Liability Company,	" the designation "LLC"	or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDR	<u>ESS)</u>			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered agent and/or the new registered office address here: Name of New Registered Agent:	l office address on	our records, <u>enter</u>	the name of the new registered	
Name of New Registered Agent.				
New Registered Office Address:	ddress: Enter Florida street address			
	Cay	, Flo	orida	
New Registered Agent's Signature, if changing Registered	d Agent:		ŕ	
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and caccept the obligations of my position as registered as being filed to merely reflect a change in the registere company has been notified in writing of this change.	omplete performan gent as provided fo	ce of my duties, an r in Chapter 605, i	d I am familiar with and F.S. Or, if this document is	

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	RODRICUS TERRY	3019 LAGNEY DRIVE	\equiv \equiv \equi
		JACKSONVILLE FL 32208	□Remove
			□ Change
			DAdd
			Remove
			□Change
			□Add
			□Remove
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ore: If the date	f other than the collisted, the date must inserted in this blo	ick does not m	eet the applica	o date of filing or a ble statutory filin	(nore than 90 days	optional) safter filing.) Pur s, this date will	suant to 605.02 not be listed
record specifies Lis filed.	a delayed effective	e date, but not a	an effective tin	ne, at 12:01 a.m.	on the earlier	of: (b) The 90	th day after th
ated	larch	25	202	2.			
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Filing Fee: \$25.00